तथा पिछले अनुभव से पता चलता है कि बाह्य एजेंसी की अपेक्षाओं को पूरा करने में राज्यों की प्रतिक्रियाओं पर निर्भर रहते हुए इन परियोजनाओं को तैयार करने में 12 से 24 महीने का समय लग जाता है। परियोजना के आयाम को इस समय आंका नहीं जा सकता।

Homoeopathic Doctors Visit at the Residence of C.G.H.S. Beneficiary

1725. SHRI RAMJI LAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Homoeopathic doctors under C.G.H.S. can make visit at the residence of C.G.H.S. beneficiary if he is ill; and

(b) if so, what are the basis thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) and (b) On being satisfied of the patient's inability to come to the dispensary due to the severity of the illness, the Medical officer may visit the patient at his residence.

Representation from Andhra Pradesh Government for Releasing Family Welfare Expenditure

1726. DR. MOHAN BABU:
DR. D. VENKATESHWAR RAO:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Central Government have received any representation from the Andhra Pradesh Government to release family Welfare expenditure in lump-sum;

(b) if so, the details thereof alongwith funds earmarked and released so far; and

(c) the action taken thereon?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) Yes, Sir.

(b) The State has indicated that they have already incurred an expenditure of Rs. 8045.00 lakhs upto the end of September, 1996, against the Grants-in-aid of Rs. 5336.93 lakhs released during 1996-97. Taking into account further expenditure expected during the current year, the State Government has asked for an additional ad hoc grant of Rs. 5400.00 lakhs.

(c) It is not possible to accommodate the request of the State Government due to financial constraints.

Health Infrastructure in Urban Areas

1727. SHRIMATI JAYAPRADA NAHATA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the health infrastructure in urban areas left much to be desired at present since the equivalent of primary health centres were not available in the urban areas; and

(b) if so, the steps proposed to increase the number of urban health centres particularly to cover urban slum population?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) and (b) The Government of India is currently supporting 1562 Post Partum Centres, 1083 Urban Family Welfare Centres and 871 Health posts in the urban areas. With a view to increase family welfare facilities in the cities of Delhi, Calcutta, Hyderabad and Bangalore a World bank assisted Population Project with an outlay of 223.37 crores is under implementation. A similar World Bank assisted project was recently completed in Madras and Bombay cities.